REQUEST FOR LSTA SUB GRANT BUDGET REVISIONS

South Carolina State Library LSTA – PL 108-81, As Amended

Sub-grantee (organization) name			Requester (Print Name and Title)		
STA Sub-grantee A	ward Number (See Offici	al Award Notice)		Current Date	
BUDGET AS APPROVED:(date)		Indicate dollar amount and category from which funds are taken and category to which funds are allocated.		ADJUSTED BUDGET AFTER TRANSFER(S)	
Personal Services	\$	\$	from	Personal Services	\$ \$
ibrary Materials	\$		to	Library Materials	
Equipment	\$	\$	from to	Equipment	\$
Other	\$	\$	from to	Other	\$
GRAND TOTAL	\$	\$	from to	GRAND TOTAL	\$
		\$	from to		
Sub-grantee Signatu	ure (Library Director or I	STA Project Administrator	only)	SCSL USE ON	LY State Grant Award #
NOTE: Char	nges that exceed 25%	of an LSTA grant award	require prior approval.	Contact the LSTA (Coordinator.